

01-13-05

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7590 10/18/2004

PATENT ADMINISTRATOR
 TESTA, HURWITZ & THIBEAULT, LLP
 HIGH STREET TOWER
 125 HIGH STREET
 BOSTON, MA 02110

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/592,975	06/12/2000	Eilon Reshef	X68X WBC-001	4638

TITLE OF INVENTION: DYNAMIC INTEGRATION OF WEB SITES

01/14/2005 GHORDUF2 00000076 09592975

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APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	X68X \$700.00	\$0	X68X X \$700.00	01/18/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			

WON, MICHAEL YOUNG

2155

709-203000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Testa Hurwitz &

2 Thibault, LLP

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

WebCollege, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

New York, New York

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

- Issue Fee
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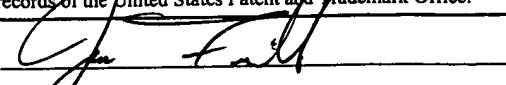
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5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 

Date 1/12/05

Typed or printed name Jason P. Fiorillo

Registration No. 52,892

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**TRANSMITTAL
FORM**

JAN 12 2005
PATENT & TRADEMARK OFFICE
U.S. DEPARTMENT OF COMMERCE

Application Serial Number	09/592,975
Filing Date	June 12, 2000
First Named Inventor	Reshef
Group Art Unit	2155
Examiner Name	Michael Yong Won
Attorney Docket No.	WBC-001 (6396/2)
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawings	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)	<input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard
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CORRESPONDENCE ADDRESS

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SIGNATURE BLOCK

Respectfully submitted,

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